## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

ME OF FILER (In Full)			
IUMANE SOCIETY LEGISLATIVE FUND			
Full Name (Last, First, Middle Initial) of Payee			T = .
Mike Markarian			Date
			10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			Amount
1206 Maryland Avenue, NE			
City	State	Zip Code	54.85
Washington	DC	20002	
Purpose of Expenditure		Category/	Office Sought: X House State: MI
Staff Time		Туре	House Senate
Name of Federal Candidate Supported or Oppos	sed by Expenditure	<del></del>	President District: 09
Joseph K Knollenberg			Check One: Support X Oppose
			Disbursement For: Primary X General
Calendar Year-To-Date Per Election		397246.48	2008 — —
for Office Sought	• • • •	007210.10	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Sara Amundson			M M / D D / Y Y Y
Mailing Address			1 0 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1627 A Street, NE			Amount
City	State	Zip Code	17.21
Washington	DC	20002	
Purpose of Expenditure		Category/	Office Sought: X House State: MI
Staff Time		Type	House Senate
Name of Federal Candidate Supported or Oppos	sed by Evnenditure		President District: 09
Joseph K Knollenberg	bod by Exponditure	•	Check One: Support X Oppose
Calendar Year-To-Date Per Election		397246.48	Disbursement For: Primary X General
for Office Sought		397240.40	Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date
Richard Patch			M M / D D / Y Y Y Y
Mailing Address			M 1 0
5500 Sherier Place, NW			Amount
City	State	Zip Code	13.51
Washington	DC	20016	
Purpose of Expenditure			Office Sought: Y House Charter MI
Staff Time		Category/ Type	State: Wil
	and by Free and Pt		House Senate District: 09
Name of Federal Candidate Supported or Opposed by Expenditure:  Joseph K Knollenberg			
		Check One: Support X Oppose	
Calendar Year-To-Date Per Election			Disbursement For: Primary X General
for Office Sought		397246.48	Other (specify)
(a) SUBTOTAL of Itemized Independent Expend	ditures		85.57
(b) SUBTOTALof Unitemized Independent Expe	enditures		
,			
(c) TOTAL Independent Expenditures			
(carry total from last page forward to	Line 7)		